Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I SMALL ENTITY OTHER TH											THAN	
			(Column 1)		(Column 2)			TYPE		OR	SMALL	
TOTAL CLAIMS								RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA	В	ASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			€ minus 20=		. 41			X\$ 9=	369	OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		* 14	+		X40=	560	OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, ente					r "0" in c	olumn 2	L	TOTAL	1284	OR	TOTAL	
CLAIMS AS AMENDED - PART II								ı			OTHER	THAN
		(Column 1)		(Colu		(Column 3)		SMALL E	NTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	andrees and	HIGH NUM PREVI PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	T CL AINA]=	lΓ	X40=		OR	X80=	
	FIRST PRESE	NIATION OF MI	JLIPLE DEP	ENDEN	CLAIM			+135=		OR	+270=	
							L	TOTAL			TOTAL	
		(Column 1)		(Colu	mn 2)	(Column 3)	Al	DDIT. FEE			ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=		X40=		OR	X80=	,
<u> </u>	FIRST PRESE	NTATION OF M	JUIPLE DEP	ENDEN	CLAIM		」	+135=	•	OR	+270=	
		,					L _ ∆⊓	TOTAL ODIT. FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	,					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=	 	X40=			X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT						」├			OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+135=		OR	+270=	
** If the entry in column 1 is less than the entry in column 2, write 0 in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		ber Previously Pa					er found	d in the app	ropriate box	in col	umn 1.	